

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	mr	67812	3/10/00
O.I.P.E. CLASSIFIER	16	3-16-00	
FORMALITY REVIEW	59383	5-4-00	
RESPONSE FORMALITY REVIEW	59383	8-4-00	

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓✓✓✓✓
2	✓	✓	✓✓✓✓✓
3	✓	✓	✓✓✓✓✓
4	✓	✓	✓✓✓✓✓
5	✓	✓	✓✓✓✓✓
6	✓	✓	✓✓✓✓✓
7	✓	✓	✓✓✓✓✓
8	✓	✓	✓✓✓✓✓
9	✓	✓	✓✓✓✓✓
10	✓	✓	✓✓✓✓✓
11	✓	✓	✓✓✓✓✓
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25	✓	✓	✓✓✓✓✓
26	✓	✓	✓✓✓✓✓
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45	✓	✓	✓✓✓✓✓
46	✓	✓	✓✓✓✓✓
47	✓	✓	✓✓✓✓✓
48			✓
49			✓
50			✓

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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